



## Texas Department of Criminal Justice

## STEP 1 OFFENDER GRIEVANCE FORM

Offender Name: Michael Yowell TDCJ # 999334Unit: Polunsky Housing Assignment: 12-A-A-4Unit where incident occurred: Polunsky

## OFFICE USE ONLY

Grievance #: \_\_\_\_\_

Date Received: \_\_\_\_\_

Date Due: \_\_\_\_\_

Grievance Code: \_\_\_\_\_

Investigator ID #: \_\_\_\_\_

Extension Date: \_\_\_\_\_

Date Retd to Offender: \_\_\_\_\_

You must try to resolve your problem with a staff member before you submit a formal complaint. The only exception is when appealing the results of a disciplinary hearing.

Who did you talk to (name, title)? Sent L-60 to Warden MunizWhen? 8-12-13What was their response? NoneWhat action was taken? None

State your grievance in the space provided. Please state who, what, when, where and the disciplinary case number if appropriate. I am scheduled for execution on 10-09-13 and I understand that the State of Texas is running out of their current supply of execution drugs and that the drugs are due to expire near the end of September 2013. I have not been told anything about how the State plans to execute me, what drugs will be used, where those drugs will come from, or what protocol will be followed. I am writing to object to and grieve these facts. I object to the State of Texas keeping all of this a secret. I ask that TDCJ give me and my lawyer this information before my execution, and that my execution be delayed until there is time to look at this information so that my grievance can be addressed.

SEP 03 2013

EXHIBIT

E

Copy 2 of 2

127 Front (Revised 11-2010)

YOUR SIGNATURE IS REQUIRED ON BACK OF THIS FORM

(OVER)

Appendix F

SEP 03 2013

SEP 03 2013

Action Requested to resolve your Complaint:

SEP 03 2013 To be given a 2hr, if execution and for 1 hr to come forth with the information requested SEP 03 2013

Offender Signature: [Signature] SEP 03 2013

Date: 9-3-13

Grievance Response:

Signature Authority:

Date:

If you are dissatisfied with the Step 1 response, you may submit a Step 2 (I-128) to the Unit Grievance Investigator within 15 days from the date of the Step 1 response. State the reason for appeal on the Step 2 Form.

Returned because: Returned to this form when three corrections submitted

- ☒ 1. Oneable time period has expired.
- ☐ 2. Submission in excess of 1 every 7 days. \*
- ☐ 3. Originals not submitted. \*
- ☐ 4. Inappropriate/excessive attachments. \*
- ☐ 5. No documented attempt at informal resolution. \*
- ☐ 6. No requested relief is stated. \*
- ☐ 7. Malicious use of vulgar, indecent, or physically threatening language. \*
- ☒ 8. The issue presented is not grievable.
- ☐ 9. Redundant. Refer to grievance # \_\_\_\_\_
- ☐ 10. Illegible/Incomprehensible. \*
- ☐ 11. Inappropriate. \*

UGI Printed Name/Signature: S. Harris SEP 03 2013

Application of the screening criteria for this grievance is not expected to adversely affect the offender's health.

Medical Signature Authority:

I-127 Back (Revised 11-2010)

OFFICE USE ONLY	
Initial Submission	UGI Initials: <u>SA</u>
Grievance #:	<u>2014001459</u>
Screening Criteria Used:	<u>99918</u>
Date Read from Offender:	<u>SEP 03 2013</u>
Date Returned to Offender:	<u>SEP 03 2013</u>
2nd Submission	UGI Initials: _____
Grievance #:	_____
Screening Criteria Used:	_____
Date Read from Offender:	_____
Date Returned to Offender:	_____
3rd Submission	UGI Initials: _____
Grievance #:	_____
Screening Criteria Used:	_____
Date Read from Offender:	_____
Date Returned to Offender:	_____

\*\*\*\*\*  
\*\*\* REQUESTOR: SHA9225 - HARRIS, SAVANNAH POLUNSKY UNIT \*\*\*  
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\*\*\* S Y S M I N B A S K E T P R I N T \*\*\*

MESSAGE ID: 149059A DATE: 09/03/13 TIME: 01:23pm PRIORITY: 000

TO: SHA9225 - HARRIS, SAVANNAH  
GRIEVANCE INVESTIGATOR II  
POLUNSKY UNIT  
3872 FM 350 SOUTH  
LIVINGSTON, TEXAS 77351

FROM: KWA0210 - WARD, KELLI  
ADMINISTRATOR, MANAGER I  
OFFENDER GRIEVANCE  
1060 STATE HWY 190 EAST  
HUNTSVILLE, TX 77342-0099

SUBJECT: Reply to LETHAL INJECT GRVS.

\*\*\* Original Author: SHA9225 - HARRIS, SAVANNAH; 09/03/13 01:16pm

DEATH ROW OFFENDERS ARE SUBMITTING GRIEVANCES SAYING THEY HAVE NOT BEEN TOLD ANYTHING ABOUT HOW THE STATE PLANS TO EXECUTE THEM, WHAT DRUGS WILL BE USED, WHERE THE DRUGS WILL COME FROM, OR WHAT PROTOCOL WILL BE FOLLOWED. THEY WERE TOLD THE STATE IS RUNNING OUT OF THE CURRENT SUPPLY OF DRUGS & THAT THE DRUGS ARE GOING TO EXPIRE AT THE END OF SEPTEMBER 2013. THEIR COMPLAINTS WERE MADE AT THE BEGINNING OF SEPTEMBER 2013.

IS THIS A GRIEVABLE ISSUE; WHAT CODE SHOULD BE UTILIZED? PLEASE ADVISE.

THANKS,  
S. HARRIS

\*\*\* Comments From: KWA0210 - WARD, KELLI; 09/03/13 01:22pm  
I SPOKE WITH MS. PARKER AND WE ARE AGREED THAT THIS IS NOT A GRIEVABLE ISSUE.

KELLI

Sent to: SHA9225

HARRIS, SAVANNAH

(to)